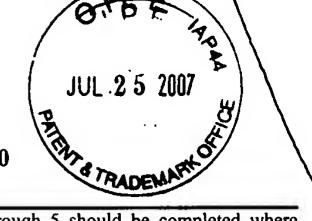
PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with plicable fee(s), to: Mail Mail Stop ISSUE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885



| INSTRUCTIONS: This appropriate. All further condicated unless corrected maintenance fee notificated. | form should be used for correspondence including d below or directed oth ions. | for transmitting the ISSUng the Patent, advance or | JE FEE and PUBLICATE ders and notification of rand specifying a new corres | ION FEE (if requination requirements for the contract of the c | ired). B vill be r and/or | Blocks 1 through 5 sh mailed to the current of (b) indicating a separ | ould be completed where correspondence address as rate "FEE ADDRESS" for | |
|---|---|---|--|--|---------------------------------------|---|--|--|
| CURRENT CORRESPONDE | Fect paper | Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | | | |
| 27557 | 1144 | | | | | | | |
| BLANK ROME LLP 600 NEW HAMPSHIRE AVENUE, N.W. WASHINGTON, DC 20037 | | | | Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | |
| \cdot | | | | (Depositor's name) | | | | |
| | | | | (Signature) | | | | |
| | | | | | | | · (Date) | |
| APPLICATION NO. FILING DATE | | FIRST NAMED INVENTOR ATTOR | | | ORNEY DOCKET NO. CONFIRMATION NO. | | | |
| 10/630,902 07/31/2003 Caius E. Egbufoa | | | | ma 9622 | | | | |
| TITLE OF INVENTION: INCINERATOR FURNACE CONDENSERS AND METHODS OF USING | | | | | | | | |
| | | | | | | | | |
| | | | | <u> </u> | · · · · · · · · · · · · · · · · · · · | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE DUE | PREV. PAID ISSU | E FEE | TOTAL FEE(S) DUE | DATE DUE | |
| nonprovisional | YES | \$700 | \$300 | \$0 | | \$1000 | 08/15/2007 | |
| EXAMINER ART UNIT | | | CLASS-SUBCLASS | | | | | |
| RINEHART, KENNETH 3749 | | | 110-342000 | 67/26/2007 CNGUYEN3 00000015 232185 10630902 | | | | |
| 1. Change of corresponde CFR 1.363). | nce address or indicatio | 2. For printing on the p | atent front page, dis | st)1 | 709.88 DA | ama IID | | |
| ☐ Change of correspo | ondence address (or Cha | (1) the names of up to or agents OR, alternation | nes of up to 3 registered patent attorneys 300816atik Rome LLP 9.00 DA | | | | | |
| Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form | | | (2) the name of a single registered attorney or a | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to | | | | |
| | 2 or more recent) attach | 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | | | |
| PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | |
| | | | • , | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | | | |
| 4a. The following fec(s) are submitted: 4b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) | | | | | | | | |
| Issue Fee A check is enclosed. | | | | | | | | |
| Publication Fee (No small entity discount permitted) Payment by cre Advance Order - # of Copies three | | | | | | • | inianas, ar aradit aust | |
| Advance Order - # | of Copies | <u> </u> | The Director is hereby overpayment, to Depo | osit Account Number | er <u>23</u> - | 2185 (enclose an | extra copy of this form). | |
| 5. Change in Entity Stat | · | | — | 1:: 0.4. | | | D 1 05()(0) | |
| | SMALL ENTITY state | | d from anyone other than t | | | | | |
| NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. | | | | | | | | |
| Authorized Signature | \mathcal{O} | | | Date J | uly | 24, 2007 | | |
| Typed or printed name | David J. E | dmondson | · | Registration N | lo | 35,126 | | |
| This collection of information application. Confident | ation is required by 37 Ciality is governed by 35 | CFR 1.311. The information U.S.C. 122 and 37 CFR | on is required to obtain or in 1.14. This collection is est | retain a benefit by t | he publi | ic which is to file (and to complete, including | by the USPTO to process) g gathering, preparing, and | |

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.